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Application No: 10/033,302
Attorney Docket No: 105159-19
Page 1 of 2

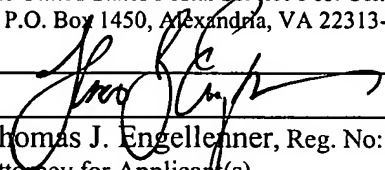
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Gregory B. Altshuler, et al.
Application No: 10/033,302
Filing Date: December 21, 2001
Entitled: METHOD AND APPARATUS FOR
EMR TREATMENT
Atty. Docket No: 105159-19

Group Art Unit: 3739
Examiner: D.M. Shay

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7 March 2004	By: 
Date of Signature and Mail Deposit	Thomas J. Engellenner, Reg. No: 28,711 Attorney for Applicant(s)

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P.O. Box 1450
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Dear Sir:

Pursuant to 37 C.F.R. §1.56, §1.97 and §1.98, Applicant herewith makes of record the enclosed document listed on the attached copy of PTO Form 1449.

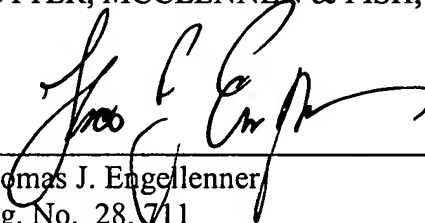
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that such publications are prior art. Moreover, the Applicant understands the Examiner will make an independent evaluation of the cited publications.

The fee under 37 C.F.R. § 1.97(c) (2) is enclosed. No additional costs are believed to be due in connection with the filing of this statement. However, please charge any necessary fees in connection with this statement to our Deposit Account No. 141449.

Respectfully submitted,

NUTTER, MCCLENNEN & FISH, LLP



Date: March 9, 2004

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/033,302
		Filing Date	December 21, 2001
		First Named Inventor	Gregory B. Altshuler, et. al.
		Group Art Unit	3739
		Examiner Name	D.M. Shay
Total Number of Pages in This Submission	1	Attorney Docket Number	105159-19

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Return Postcard Form PTO/SB/08A and Copy of One (1) References Cited Therein
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Signature	
Date	March 9, 2004

Transmittal	
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